

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213553194								
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: FMC WYOMING CORPORATION</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 12/31/2013</p> <p>SCC ID NO: F0444994</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMAV</td> <td>10,000</td> </tr> <tr> <td>COMBNV</td> <td>10,000</td> </tr> <tr> <td>COMCNV</td> <td>10,000</td> </tr> </tbody> </table> </div> </div>			CLASS	AUTHORIZED	COMAV	10,000	COMBNV	10,000	COMCNV	10,000
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 1735 MARKET STREET</p> <p style="text-align: center;">CITY/ST/ZIP: PHILADELPHIA, PA 19103</p>										
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>										
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: EDWARD FLYNN TITLE: PRESIDENT ADDRESS: 1735 MARKET STREET CITY/ST/ZIP/CO: PHILADELPHIA, PA 19103 </td> <td style="width: 5%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: top;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: EDWARD FLYNN TITLE: PRESIDENT ADDRESS: 1735 MARKET STREET CITY/ST/ZIP/CO: PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR					
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY J. HARDING ASST SECRETARY 1735 MARKET ST. PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH E. PATTISON ASST SECRETARY 1735 MARKET ST. PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	VICTORIA WALTON ASST SECRETARY 1735 MARKET ST. PHILADELPHIA, PA 19103	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK A. DOUGLAS DIRECTOR 1735 MARKET ST. PHILADELPHIA, PA 19103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DIRK FRANKE DIRECTOR 1735 MARKET ST. PHILADELPHIA, PA 19103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFF RASMUSSEN DIRECTOR 1735 MARKET ST. PHILADELPHIA, PA 19103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHIGEKI YAMASHANTI DIRECTOR SUMITOMO CORPORATION TOKYO,JAPAN , , FN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT ZACKER DIRECTOR 1735 MARKET ST. PHILADELPHIA, PA 19103	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ VICTORIA WALTON SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	VICTORIA WALTON, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	11/4/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			